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PATENT 5-1503

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the **PATENT APPLICATION** of:

Kaewell, Jr. et al.

Application No.: 09/699,145

Confirmation No.: 6267

Filed: October 27, 2000

For: CODE DIVISION MULTIPLE ACCESS
MODEM INTERFACE

Group: 2181

Examiner: Christopher E. Lee

Our File: I-2-0116.1US

Date: May 9, 2003

REPLY PURSUANT TO 37 C.F.R. §1.111

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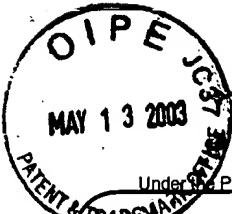
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Sir:

This Reply is responsive to the Office Action dated March 14, 2003. Please amend the application as follows:



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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

(to be used for all correspondence after initial filing)	Application Number	09/699,145
	Filing Date	October 27, 2000
	First Named Inventor	Kaewell, Jr. et al.
	Art Unit	2181
	Examiner Name	Christopher E. Lee
Total Number of Pages in This Submission		
	Attorney Docket Number	I-2-0116.1US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Exhibit 1 (3 pages).
Remarks		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	JEFFREY M. GLABICKI Volpe and Koenig, P.C.	Reg. No.42,854
Signature		
Date	May 9, 2003	

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	JEFFREY M. GLABICKI
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	Date May 9, 2003

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